

Fill in this information to identify the case:

Debtor name Carriage Park Associates, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINA

Case number (if known) 16-10255

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☐ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☐ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☐ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☐ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☐ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on July 28, 2016

X /s/ Dale A. Hamlin

Signature of individual signing on behalf of debtor

Dale A. Hamlin

Printed name

Manager

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Carriage Park Associates, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-10255**☐ Check if this is an amended filing**Official Form 206Sum**
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B*..... \$ **11,040,000.00**1b. **Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,003,600.00**1c. **Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **12,043,600.00****Part 2: Summary of Liabilities**2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **13,651,677.59**3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **65,918.55**3b. **Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **1,235,481.80**4. **Total liabilities**
Lines 2 + 3a + 3b\$ **14,953,077.94**

Fill in this information to identify the case:Debtor name **Carriage Park Associates, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-10255**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****2. Cash on hand****\$0.00****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

4. Other cash equivalents (Identify all)**5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$0.00**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments**13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Debtor **Carriage Park Associates, LLC**
NameCase number (If known) **16-10255****Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture office furniture, etc	\$0.00		\$2,500.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$2,500.0044. **Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			

Debtor **Carriage Park Associates, LLC**
NameCase number (If known) **16-10255**49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)****Lawn mower and a utility trailer.****\$0.00****Comparable sale****\$1,100.00**51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$1,100.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes Fill in the information below.55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest****Description and location of property**

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).

Nature and extent of debtor's interest in property**Net book value of debtor's interest (Where available)****Valuation method used for current value****Current value of debtor's interest**55.1. **spec house 245 Millbrae Loop Hendersonville, NC 28791****\$390,000.00****Comparable sale****\$390,000.00**55.2. **model home 20 Narrow Run Loop Hendersonville, NC 28791- this home does not have a tax value because the house was built on one of the lots owned by Carriage Park. The lender never updated the deed of trust to include the improvement to the lot.****\$650,000.00****Appraisal****\$650,000.00**

Debtor **Carriage Park Associates, LLC**
NameCase number (If known) **16-10255**55.3. **76 platted and
recorded lots
150 potential lots that
have not been
platted or recorded****\$0.00****\$10,000,000.00**56. **Total of Part 9.****\$11,040,000.00**Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.57. **Is a depreciation schedule available for any of the property listed in Part 9?**☒ No☐ Yes58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**☒ No☐ Yes**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☐ No. Go to Part 11.☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets Carriage Park owns business documents that contain intellectual property pertaining to strategies for successful land development	\$0.00		\$1,000,000.00

61. **Internet domain names and websites**62. **Licenses, franchises, and royalties**63. **Customer lists, mailing lists, or other compilations**64. **Other intangibles, or intellectual property**65. **Goodwill**66. **Total of Part 10.****\$1,000,000.00**

Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?☒ No☐ Yes68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**☒ No☐ Yes69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**☒ No☐ Yes

Debtor **Carriage Park Associates, LLC**
Name

Case number (If known) **16-10255**

Part 11: **All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.
☐ Yes Fill in the information below.

Debtor **Carriage Park Associates, LLC**
NameCase number (If known) **16-10255****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$2,500.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$1,100.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$11,040,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$1,000,000.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$1,003,600.00	+ 91b. \$11,040,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$12,043,600.00

Fill in this information to identify the case:

Debtor name **Carriage Park Associates, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-10255**☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Arendale Holdings Corporation Creditor's Name 420 Marsh Landing Boulevard, Suite 100 Jacksonville Beach, FL 32250 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Multiple lots, Carriage Park Subdivision Describe the lien Deed of Trust Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$13,564,835.00	\$10,000,000.00

2.2	Brenda E. Altschul Creditor's Name c/o Ervin W. Bazzle Bazzle, Carr & Parce, P.A. P.O. Box 608 Hendersonville, NC 28793 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number	Describe debtor's property that is subject to a lien Multiple lots at Carriage Park Subdivision Describe the lien Deed of Trust Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	\$86,842.59	\$10,000,000.00
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Debtor **Carriage Park Associates, LLC**

Case number (if know)

16-10255

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$13,651,677.
59

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **Carriage Park Associates, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-10255**☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address
Henderson County Tax Collector
Attn: Sherri Staton, Deputy Tax
Collecto
200 N Grove St. Suite 66
Hendersonville, NC 28792

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

For information purposes only

Is the claim subject to offset?

☒ No☐ Yes

Total claim Priority amount

\$65,918.55 \$0.00

2.2 Priority creditor's name and mailing address
Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

Date or dates debt was incurred

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

As of the petition filing date, the claim is:

Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

For informational purposes only

Is the claim subject to offset?

☒ No☐ Yes**\$0.00 \$0.00****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.1	Nonpriority creditor's name and mailing address 4X4 Country & Cub Cadet, Inc. 1 Meadowlark Lane Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,269.23
3.2	Nonpriority creditor's name and mailing address AAA Septic Service, Inc. 11 Cureton Place Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$375.00
3.3	Nonpriority creditor's name and mailing address Able Septic Tank Service 20 Brownwood Avenue Asheville, NC 28806 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
3.4	Nonpriority creditor's name and mailing address ABR Services, Inc. 209 E. Chestnut Street Asheville, NC 28801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,159.80
3.5	Nonpriority creditor's name and mailing address Accelerated Potential, Inc. 140 Royal Assembly Drive Charleston, SC 29492 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Account Payable</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,000.00
3.6	Nonpriority creditor's name and mailing address Adams Apple 202 Glenheath Drive Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.7	Nonpriority creditor's name and mailing address Adams, Hendon, Carson, Crow and Saenger P.O. Box 2714 Asheville, NC 28802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,204.16

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.8	Nonpriority creditor's name and mailing address Advanced PC Solutions, Inc. 120 Chadwick Avenue, Suite 13 Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.9	Nonpriority creditor's name and mailing address Armin L. Wessel Architect P.O. Box 305 Burnsville, NC 28714 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,000.00
3.10	Nonpriority creditor's name and mailing address Asheville Area Chamber of Commerce P.O. Box 1010 Asheville, NC 28802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$998.00
3.11	Nonpriority creditor's name and mailing address Asheville Area Chamber of Commerce P.O. Box 1010 Community Betterment Foundation Asheville, NC 28802 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.12	Nonpriority creditor's name and mailing address Asheville Regional Airport ATTN: Guest Services Desk 61 Terminal Drive, Suite 17 Fletcher, NC 28732 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$275.00
3.13	Nonpriority creditor's name and mailing address Audio/Video Architects P.O. Box 69 Saluda, NC 28773 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$937.00
3.14	Nonpriority creditor's name and mailing address Auto Owners Insurance P.O. Box 30315 Lansing, MI 48909 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,162.66

Debtor	Carriage Park Associates, LLC Name	Case number (if known)	16-10255
3.15	Nonpriority creditor's name and mailing address Bradford South and Associates, Inc. 714 Oakland Street Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.16	Nonpriority creditor's name and mailing address Brendon Hamlin 270 Rockbridge Rd Mills River, NC 28759 Date(s) debt was incurred <u>2010</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$140,000.00
3.17	Nonpriority creditor's name and mailing address Carolina Home & Garden Magazine P.O. Box 1070 Flat Rock, NC 28731 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,550.00
3.18	Nonpriority creditor's name and mailing address Ceeco Publishing, Inc. P.O. Box 1380 Weaverville, NC 28787 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,072.20
3.19	Nonpriority creditor's name and mailing address Chad Sharkey Morris Manning & Martin 1000 Park Forty Plaza, Suite 350 Durham, NC 27713 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorney Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.20	Nonpriority creditor's name and mailing address Chapel Hill Magazine 104-B North Elliot Road Chapel Hill, NC 27514 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,035.12
3.21	Nonpriority creditor's name and mailing address Charles Brooks 150 Raven Creek Drive Hendersonville, NC 28739 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,082.00

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.22	Nonpriority creditor's name and mailing address Chase Card Services P.O. Box 15153 Wilmington, DE 19886-5153 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,753.99
3.23	Nonpriority creditor's name and mailing address Clear Water Environmental 718 Oakland Street Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,052.34
3.24	Nonpriority creditor's name and mailing address Colton Enterprises, Inc. d/b/a Tate's Grading P.O. Box 1023 Mountain Home, NC 28758 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$770.00
3.25	Nonpriority creditor's name and mailing address Cranfill, Sumner & Hartzog, LLP P.O. Box 27808 Raleigh, NC 27611-7808 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,285.01
3.26	Nonpriority creditor's name and mailing address Critter Control of Charlotte 9415 Parkton Road, Suite A Charlotte, NC 28215 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$189.00
3.27	Nonpriority creditor's name and mailing address Duane L. Lyda Services, LLC 59 McElrath Road Arden, NC 28704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trae debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.00
3.28	Nonpriority creditor's name and mailing address Duke Energy P.O. Box 70515 Charlotte, NC 28272-0515 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utility services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.48

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.29	Nonpriority creditor's name and mailing address Dun & Bradstreet 75 Remittance Drive, Suite 1793 Chicago, IL 60675-1793 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$224.00
3.30	Nonpriority creditor's name and mailing address Durham Magazine 104-B North Elliott Road Chapel Hill, NC 27514 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,243.69
3.31	Nonpriority creditor's name and mailing address Dwell P.O. Box 5100 Harlan, IA 51593-0600 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19.95
3.32	Nonpriority creditor's name and mailing address Ed Holmes and Associates Land Surveyors P.O. Box 17335 Asheville, NC 28816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,830.00
3.33	Nonpriority creditor's name and mailing address Elissa Hamlin 20 Narrows Run Loop Hendersonville, NC 28791 Date(s) debt was incurred <u>2010</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,000.00
3.34	Nonpriority creditor's name and mailing address Fischer Publications, Inc. P.O. Box 1683 Hendersonville, NC 28793 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,252.34
3.35	Nonpriority creditor's name and mailing address Focus3, Inc. 201 Shannon Oaks Circle, Suite 200 Cary, NC 27511 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,524.00

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.36	Nonpriority creditor's name and mailing address Frank B. Jackson Attorney at Law P.O. Box 1666 Hendersonville, NC 28793 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,602.90
3.37	Nonpriority creditor's name and mailing address Gilbert Grading Inc. 300 Chipmunk Drive Hendersonville, NC 28739 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,962.00
3.38	Nonpriority creditor's name and mailing address Gosnell Construction & Utility Co., Inc. 1745 Pleasant Grove Road Hendersonville, NC 28739 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,400.00
3.39	Nonpriority creditor's name and mailing address Harry's Ditching Service, Inc. 15 Flat Hill Lane Penrose, NC 28766 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160,176.07
3.40	Nonpriority creditor's name and mailing address High Five Enterprises, Inc. P.O. Box 8683 Asheville, NC 28814 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$395.00
3.41	Nonpriority creditor's name and mailing address Horizons USA Marketing P.O. Box 1078 Norris, TN 37828 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
3.42	Nonpriority creditor's name and mailing address Jeff Merrill Asphalt Seal Coating 16 Valley Wood Court Asheville, NC 28803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$350.00

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.43	Nonpriority creditor's name and mailing address John Berube 1202 David Mtn. Road Hendersonville, NC 28739 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,527.00
3.44	Nonpriority creditor's name and mailing address Johnson, Price and Sprinkle, PA P.O. Box 8385 Asheville, NC 28814 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Professional Servicesq</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,490.75
3.45	Nonpriority creditor's name and mailing address Journal Communications, Inc. 725 Cool Springs Blvd., Suite 400 Franklin, TN 37067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
3.46	Nonpriority creditor's name and mailing address K & L Gates, LLP K & L Gates Center - RCAC 210 Sixth Avenue Pittsburgh, PA 15222 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,847.91
3.47	Nonpriority creditor's name and mailing address Kessel Engineering Group 582 Hendersonville Road, Suite One Asheville, NC 28803 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,859.95
3.48	Nonpriority creditor's name and mailing address Lee E Sanders 106 Carrington Place Arden, NC 28704 Date(s) debt was incurred <u>2015</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>salary</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$230,000.00
3.49	Nonpriority creditor's name and mailing address Lee Sanders 106 Carrington Place Arden, NC 28704 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$463.21

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.50	Nonpriority creditor's name and mailing address Leech, tishman, Fuscaldo & Lampl, LLC 525 William Penn Place, 28th Floor Pittsburgh, PA 15219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.51	Nonpriority creditor's name and mailing address Leisure Publishing Co. P.O. Box 21535 Roanoke, VA 24018 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,726.79
3.52	Nonpriority creditor's name and mailing address Linsley, John R. and Marsha 7172 Magdalena Drive Orange, CA 92867 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,050.00
3.53	Nonpriority creditor's name and mailing address McGuire, Wood & Bissette, P.A. P.O. Box 3180 Asheville, NC 28802-3180 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66,376.19
3.54	Nonpriority creditor's name and mailing address Nexsen Pruet Jacobs & Pollard, P.A. P.O. Drawer 2426 Columbia, SC 29202 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,800.63
3.55	Nonpriority creditor's name and mailing address O'Cain Design Group 118 Fifth Avenue West Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.56	Nonpriority creditor's name and mailing address Pardee Hospital Foundation 800 N Justice Street Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Obligation</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.57	Nonpriority creditor's name and mailing address Paul Patterson P.O. Box 6114 Hendersonville, NC 28793-6114 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,200.00
3.58	Nonpriority creditor's name and mailing address Pitney Bowes P.O. Box 371874 Pittsburgh, PA 15250-7874 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$205.01
3.59	Nonpriority creditor's name and mailing address Pitts, Hay & Hugenschmidt 137 Biltmore Avenue Asheville, NC 28801 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Attorneys fees Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$960.00
3.60	Nonpriority creditor's name and mailing address Private Communitieis Registry, Inc. 7550 N. US 1 Vero Beach, FL 32967 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,325.00
3.61	Nonpriority creditor's name and mailing address PSNC Energy P.O. Box 100256 Columbia, SC 29202-3256 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Utility Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$165.30
3.62	Nonpriority creditor's name and mailing address Randolph C. Romeo 136 South King Street, Suite B Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Attorneys fees Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$743.75
3.63	Nonpriority creditor's name and mailing address Randy's Grounds Service 150 Rugby Forest Lane Hendersonville, NC 28791 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,735.00

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.64	Nonpriority creditor's name and mailing address Red Top Development 3114 Quilting Road Matthews, NC 28105 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,664.00
3.65	Nonpriority creditor's name and mailing address Roto-Rooter P.O. Box 16622 Asheville, NC 28816 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$289.46
3.66	Nonpriority creditor's name and mailing address Sam's Club Sales Division P.O. Box 36490 Louisville, KY 40233 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$289.46
3.67	Nonpriority creditor's name and mailing address Simpson's Plumbing & Septic Service 540 South Grove Street Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.68	Nonpriority creditor's name and mailing address Somersby Park HOA P.O. Box 6215 Hendersonville, NC 28793 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,000.00
3.69	Nonpriority creditor's name and mailing address Southern Living Box 223545 Pittsburgh, PA 15251-2545 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,903.50
3.70	Nonpriority creditor's name and mailing address Stamps.com P.O. Box 202928 Dallas, TX 75320-2928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31.98

Debtor **Carriage Park Associates, LLC**
NameCase number (if known) **16-10255**

3.71	Nonpriority creditor's name and mailing address Staples Department 00-01966274 P.O. Box 183174 Columbus, OH 43218-3174 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00
3.72	Nonpriority creditor's name and mailing address Steven L. Waggoner, Lic. Surv. 545 South Grove Street Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$998.00
3.73	Nonpriority creditor's name and mailing address Thane Gash Grading and Landscaping P.O. Box 2710 Hendersonville, NC 28793 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,025.07
3.74	Nonpriority creditor's name and mailing address U.S. Cellular P.O. Box 530724 Atlanta, GA 30353-0724 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Telephone Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.75	Nonpriority creditor's name and mailing address Vacation Publications, Inc. 5851 San Felipe Street, Suite 500 Houston, TX 77057 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,142.04
3.76	Nonpriority creditor's name and mailing address Vulcan Construction Materials LP P.O. Box 75219 Charlotte, NC 28275-0219 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,933.31
3.77	Nonpriority creditor's name and mailing address Waggoner & Rhodes 545 Old Spartanburg Road Hendersonville, NC 28792 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,378.50

Debtor **Carriage Park Associates, LLC** Case number (if known) **16-10255**
Name

3.78 Nonpriority creditor's name and mailing address **WHKP**
P.O. Drawer 2470
Hendersonville, NC 28793
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$813.05**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.79 Nonpriority creditor's name and mailing address **Who's Calling**
P.O. Box 3675
Seattle, WA 98124-3675
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$211,067.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade debt**
Is the claim subject to offset? ☒ No ☐ Yes

3.80 Nonpriority creditor's name and mailing address **Xerox Corporation**
P.O. Box 650361
Dallas, TX 75265-0361
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$700.00**
☐ Contingent
☐ Unliquidated
☐ Disputed
Basis for the claim: **Trade debt**
Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 65,918.55
5b. +	\$ 1,235,481.80
5c.	\$ 1,301,400.35

Fill in this information to identify the case:

Debtor name **Carriage Park Associates, LLC**

United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**

Case number (if known) **16-10255**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

Printing from the office.

State the term remaining

Approximately 6 months

List the contract number of any government contract

Xerox Corporation
P.O. Box 650361
Dallas, TX 75265-0361

Fill in this information to identify the case:Debtor name **Carriage Park Associates, LLC**United States Bankruptcy Court for the: **WESTERN DISTRICT OF NORTH CAROLINA**Case number (if known) **16-10255**☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the code debtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor*

Name	Mailing Address	Name	Check all schedules that apply:
2.1	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	Street City State Zip Code		<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:Debtor name Carriage Park Associates, LLCUnited States Bankruptcy Court for the: WESTERN DISTRICT OF NORTH CAROLINACase number (if known) 16-10255☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2016** to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)**\$0.00****For prior year:**From **1/01/2015** to **12/31/2015**☒ Operating a business☐ Other _____**\$14,000.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
Check all that apply

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255****4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
------------------------------------------------------	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

Custodian's name and Address	Describe the property	Value
Arendale	Arendale obtained a default judgment against Carriage Park	\$9,700,000.00

Case title	Court name and address
Arendale Holdings v. Carriage Park	Henderson County Superior Court
Case number	300 N Grove St
16 CVS 00137	Hendersonville, NC
Date of order or assignment	28792
2/11/2016	

Part 4: Certain Gifts and Charitable Contributions**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**
☒ None

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	-------------------------------------------	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Dates of loss	Value of property lost
Residential damages due to water leaks.	2,000.00	January 2016.	\$2,000.00

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Elkins Law Office 228 6th Ave, East Suite 1B Hendersonville, NC 28792	Attorney's Fees		\$10,000.00
Email or website address trade@elkinslawfirm.net			
Who made the payment, if not debtor?			
11.2. Law Offices of Elisabeth Murray-Oberlein 140 Fourth Avenue West Suite 103 Hendersonville, NC 28792	Attorney Fees		\$6,000.00
Email or website address emolegal@yahoo.com			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	-------------------------------------------------------------------------------------	---------------------------------------------------------------------------------

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

☒ No.
☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
-------------------------------------------	------------------------------------	----------------------------------	---------------------------------------------------------------	-----------------------------------------------

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. Home Trust Bank 228 6th Ave E Hendersonville, NC 28792	XXXX-933	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other___	February of 2016	\$0.00

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Do you still have it?
-----------------------------------------	-------------------------------------------	-----------------------------	-----------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Do you still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Dale Hamlin 20 Narrow Run Loop Hendersonville, NC 28791	Office Space Spec House Hendersonville, NC 28791	Personal furniture, pictures, tax returns, books, etc.	\$15,000.00

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☒ No.

☐ Yes. Provide details below.

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Carriage Park Realty 2827 Haywood Rd. Hendersonville, NC 28791	Real estate.	Dates business existed EIN: 26-0170031 From-To June 1992 - Present, but not currently selling.

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. Lee Sanders 106 Carrington Place Arden, NC 28704	2006 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26b.1. Capital Funding 541 10th St. NW Suite 430 Atlanta, GA 30318	
26b.2. Icon Commercial Lending 6905 S. 1300 East Suite 175 Cottonwood Heights, UT 84047	

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Name and address		Date of service From-To
26b.3.	DNA's Realty and Capital LLC 30 Wall St. 8th Floor New York, NY 10005	
Name and address		Date of service From-To
26b.4.	East Side Capital Group Corp 626 RxR Plaza West Wing 6th Floor Uniondale, NY 11556	
Name and address		Date of service From-To
26b.5.	Tom Hammond Hammond Securities Company, LLC P.O. Box 6007 Laguna Niguel, CA 92607	
Name and address		Date of service From-To
26b.6.	Jack Leachman Anchor Mortgage, LLC 41 Clayron St. Asheville, NC 28801	
Name and address		Date of service From-To
26b.7.	Sal Espinoza Business Money Mart salespinoza@businessmoneymart.com	
Name and address		Date of service From-To
26b.8.	Taramare Capital Partners, LLC P.O. Box 2233 Hayden, ID 83835	
Name and address		Date of service From-To
26b.9.	Richard Phipps CFS Realty & Management, Inc. 1509 Bluehill Ave. Boston, MA 02126	
Name and address		Date of service From-To
26b.10.	Scott Buckiewicz Element Capital Lending, LLC. 275 N. Union Blvd., Ste. 140 #48 Colorado Springs, CO 80920	
Name and address		Date of service From-To
26b.11.	Dan Greenberg Acres Capital 300 Jericho Quadrangle Suite 160 Jericho, NY 11753	
Name and address		Date of service From-To
26b.12.	JCAP Global Co. 80 Barclay Center Suite 3 Cherry Hill, NJ 08034-2130	

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Name and address	Date of service From-To
26b.13. Prime Millinium, INC. and Mortgage Enter 393 Old Country Rd. Suite 301 Carle Place, NY 11514	
Name and address	Date of service From-To
26b.14. Randy Romeo	
Name and address	Date of service From-To
26b.15. John Miller	
Name and address	Date of service From-To
26b.16. Elizabeth Murray-Oberteain 140 Fourth Ave. West Suite 103 Hendersonville, NC 28792	

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---------------------------------------------------------------------

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address
26d.1. Capital Funding Resources 541 10th St. NW Suite 430 Atlanta, GA 30318
26d.2. Icon Commercial Lending 6905 S 1300 East Suite 175 Cottonwood Heights, UT 84047
26d.3. DNA's Realty and Capital, LLC. 30 Wall St. 8th Floor New York, NY 10005
26d.4. East Side Capital Group, Corp 626 RxR Plaza West Wing 6th Floor Uniondale, NY 11556
26d.5. Tom Hammond Hammond Securities Co. LLC P.O. Box 6007 Laguna Niguel, CA 92607
26d.6. Jack Leachman Anchor Mortgage, LLC 41 Clayton St Asheville, NC 28801

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255****Name and address**

26d.7. **Sal Espinoza**
Business Money Mart
salespinoza@businessmoneymart.com

26d.8. **Taramarc Capital Partners, LLC.**
P.O. Box 2233
Hayden, ID 83835

26d.9. **Richard Phipps**
CFS Realty & Management, INC
1509 Bluehill Ave.
Boston, MA 02126

26d.10. **Scott Buckiewicz**
Element Capital Lending, LLC
9275 N. Union Blvd., Ste. 140
#48
Colorado Springs, CO 80920

26d.11. **Dan Greenberg**
Acres Capital
300 Jericho Quadrangle
Suite 160
Jericho, NY 11753

26d.12. **JCAP Global Co.**
80 Barclay Center
Suite 3
Cherry Hill
Cherry Hill, NJ 08034

26d.13. **Prime Millinium, Inc. and Mortgage Enter**
393 Old Country Rd.
Suite 301
Carle Place, NY 11514

26d.14. **Randy Romeo**

26d.15. **John Miller**

26d.16. **Elizabeth Murray-Obertein**
140 Fourth Ave. West
Suite 103
Hendersonville, NC 28792

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Name	Address	Position and nature of any interest	% of interest, if any
Dale Hamlin	20 Narrow Run Loop Hendersonville, NC 28791	Member/Manager	100

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1		500.00		
		600.00		
		621.42	07/01/2015	
		300.00	10/05/2015	
		200.00	10/06/2015	
		300.00	10/07/2015	
		450.00	10/09/2015	
		200.00	10/13/2015	
		200.00	10/15/2015	
		100.00	10/20/2015	
		2,100.00	10/23/2015	
	Dale Hamlin 20 Narrow Run Loop Hendersonville, NC 28791	Total 5,571.72	10/24/2015 10/29/2015	To pay bills.
	Relationship to debtor Member/Manager			
30.2		500.00		
		1,000.00		
		250.00		
		800.00	07/01/2015	
		300.00	07/07/2015	
		425.00	09/03/2015	
		200.00	10/05/2015	
		350.00	10/13/2015	
		500.00	10/14/2015	
	Elissa Hamlin 20 Narrow Run Loop Hendersonville, NC 28791	total 4,325	10/15/2015 10/21/2015 11/05/2015	To pay bills.
	Relationship to debtor Wife of Member/Manager			

Debtor **Carriage Park Associates, LLC**Case number (if known) **16-10255**

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.3	100.00		
	100.00		
	100.00		
	500.00	07/02/2015	Lee was not being paid a salary at this time and needed the draws to pay bills.
Lee Sanders		07/10/2015	
106 Carrington Place		08/05/2015	
Arden, NC 28704	Total	09/03/2015	
	800		
Relationship to debtor			
Accountant			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **July 28, 2016****/s/ Dale A. Hamlin**

Signature of individual signing on behalf of the debtor

Dale A. Hamlin

Printed name

Position or relationship to debtor **Manager**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
Western District of North Carolina**

In re **Carriage Park Associates, LLC**

Debtor(s)

Case No. **16-10255**

Chapter **7**

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	5,000.00
Prior to the filing of this statement I have received	\$	5,000.00
Balance Due	\$	0.00

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify): **Dale Hamlin**

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

July 28, 2016

Date

/s/ Elisabeth Murray-Obertein

Elisabeth Murray-Obertein

Signature of Attorney

Law Offices of Elisabeth Murray-Obertein

140 Fourth Avenue West Suite 103

Hendersonville, NC 28792

828-595-9733 Fax: 828-214-6292

emolegal@yahoo.com

Name of law firm

**United States Bankruptcy Court
Western District of North Carolina**

In re **Carriage Park Associates, LLC**

Debtor(s)

Case No. **16-10255**

Chapter **7**

VERIFICATION OF CREDITOR MATRIX

I, the Manager of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **July 28, 2016**

/s/ Dale A. Hamlin

Dale A. Hamlin/Manager

Signer/Title